

The Village of Salado requires all contractors doing business inside the city to complete and submit a Contractor Registration Application. You must submit your completed application, appropriate fee, the required documentation, and be issued a Contractor Registration Certificate prior to conducting any contract labor within the Village limits.

Contractor Registration Certificates are issued on a calendar year basis and expire December 31st of the issuing year.

Additionally, The Village of Salado requires all contractors to comply with the following list of adopted codes and Village ordinances:

- 2011 National Electric Code
- 2009 International Mechanical Code
- 2009 International Plumbing Code
- 2009 International Residential Code
- 2009 International Building Code
- 2009 International Energy Conservation Code
- 2009 International Fire Code
- 2009 International Fuel Gas Code
- 2009 International Existing Building Code
- 1994 Texas Accessibility Standards

A copy of Village ordinances can be found online at www.saladotx.gov or at the Village offices.

Application for Contractor Registration

- | | |
|---|--|
| <input type="checkbox"/> General Contractor (\$100.00) | <input type="checkbox"/> Lawn Service (\$15.00) |
| <input type="checkbox"/> General Home Repair/Handyman (\$50.00) | <input type="checkbox"/> Electrical Contractor (\$50.00) |
| <input type="checkbox"/> Fire Suppression Contractor (\$50.00) | <input type="checkbox"/> Plumbing Contractor (no fee) |
| <input type="checkbox"/> Swimming Pool Contractor (\$50.00) | <input type="checkbox"/> Mechanical Contractor (\$50.00) |
| <input type="checkbox"/> Septic System Contractor (\$50.00) | <input type="checkbox"/> Backhoe/Dirt Work (\$50.00) |
| <input type="checkbox"/> Lawn Irrigation Contractor (\$50.00) | <input type="checkbox"/> Demolition Contractor (\$50.00) |

Business Name: _____

Physical Address: _____ City: _____ State: ____ Zip Code: _____

Mailing Address: _____ City: _____ State: ____ Zip Code: _____

Contact: _____ Number: _____

License Holder Information		
First Name: _____	Last Name: _____	
License #: _____	Type: _____	Exp: _____
License #: _____	Type: _____	Exp: _____
Driver's License #: _____	State: _____	Exp: _____
Persons Authorized to Sign & Schedule Inspections		
Name: _____	Number: _____	
Name: _____	Number: _____	
Name: _____	Number: _____	

Please attach the following items with this application:

- ☐ Copy of Contractor State License (if applicable)
- ☐ Copy of Texas State Driver's License
- ☐ Copy of Certificate of Insurance

Applicant Signature

Printed Name

Date

FOR OFFICE USE ONLY

Received By: _____

Amount Received: _____

☐ Check ☐ Cash ☐ Money Order

Date: _____

Registration #: 2015-_____